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26986 7590 04/20/2005

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David W. O'Bryant (Depositor's name)
David W. O'Bryant (Signature)
July 18, 2005 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/822,555 04/12/2004 George E. Gerpheide 2673.C2MW.NP 1811

TITLE OF INVENTION: ZERO DRIFT ANALOG MEMORY CELL, ARRAY AND METHOD OF OPERATION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
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nonprovisional YES \$700 \$300 \$1000 07/20/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
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NGUYEN, HIEN N 2824 365-045000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

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1 MORRISS
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- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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David W. O'Bryant

Date

7/18/2005

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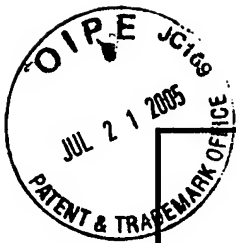
David W. O'Bryant

Registration No.

39,793

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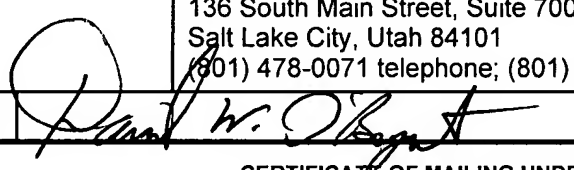
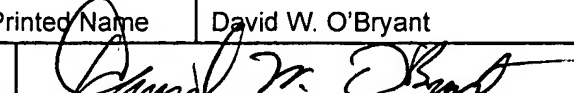
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/822,555	
	Filing Date	April 12, 2004	
	First Named Inventor	George E. Gerpheide	
	Group Art Unit	2824	
	Examiner Name	Hien N. Nguyen	
Total Number of Pages in This Submission (including this sheet)	3	Attorney Docket No.	2673.C2MW.NP

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Appeal Communication: <input type="checkbox"/> Appeal Notice <input type="checkbox"/> Appeal Brief <input type="checkbox"/> Reply Brief <input type="checkbox"/> Assignment with Cover Sheet <input type="checkbox"/> Certified Copy of Priority Document(s) <input checked="" type="checkbox"/> Check in the amount of \$ <u>1030</u> <input type="checkbox"/> Credit card authorization in the amount of \$ ____ <input type="checkbox"/> Declaration & Power of Attorney <input type="checkbox"/> Drawings ____ sheets <input type="checkbox"/> Formal <input type="checkbox"/> Informal	<input type="checkbox"/> Extension of Time Request ____ month <input type="checkbox"/> Fee Calculation Table <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Form 1449 <input type="checkbox"/> Copies of IDS References <input checked="" type="checkbox"/> Issue Fee Transmittal & Advance Order	<input type="checkbox"/> Maintenance Fee Transmittal ____ year <input type="checkbox"/> Missing Parts Response <input type="checkbox"/> Notification of Change of Attorney Address & Docket Number <input checked="" type="checkbox"/> Return Postcard <input type="checkbox"/> Revocation & Power of Attorney <input type="checkbox"/> Status Inquiry <input type="checkbox"/> Other:
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Attorney for Applicant	David W. O'Bryant, Registration No. 39,793 MORRISS O'BRYANT COMPAGNI, P.C. 136 South Main Street, Suite 700 Salt Lake City, Utah 84101 (801) 478-0071 telephone; (801) 478-0076 facsimile		
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